Rev. 06/2006

State of Idaho

LOBBYIST	ANNUAL	REPORT	FORM
	ALITIONAL		TOIN

To Be Filed By:							
L-2	LOBBYISTS (Sec. 67-6619)						

Page	of	Page(s)
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		Ben Ysursa Secretary of S	•	L-2		BYIST <i>67-</i> 66						
		(Type or print cles		Annual			Sen	ni-Annu	ıal	O7 JA		M 7: 33
V = L L		See instructions a	bottom of page			To				STAT	FILE	IDAHO
Lobbyis	its name ar	nd permanent busine	ess address			Da	te prepare	od.			covered	adia a
999		nunications 11th Floor 702						1-30 - 0	7	(Mo.	year en) (Day 31	-
Item 1	То	tals of all reportat	ole expenditures made o	r incurred t	by Lobb	yist o	by Lob	oyist's Empl	oyer on	behalf of Lobb	yist's Emp	ployer.
Co	oursed Person	Expenditure al Living and Travel to Lobbying Activity	*Total Amount for All Employers	Proportion Item 3, at				by each emp	loyer (Id	entify cmployer	s, under	
D	o Not Have	to be Reported	7th Billiproyers	Employer No.		1	Employer No. 2		Em	ployer No. 3	Employer No. 4	
Food a	inment nd Refresi		\$ <u>1,375.79</u>	s	1,375.7	79	\$		s		\$	
Living	Accommo	dations				-						
Advert	ising											
Travel						-						
Telepho		-01					-					
Other E	expenses	or Services										
		Total	s1,375.79	\$1	1,375.7	79	s	0.00	s	0.00	s	0.00
			are reporting for require									
Item 2	Date	is of each expendi	ture of more than fifty d	011818 (22U	_	egisiat mount				ce, and executi		
		1	Nothing to Report									
	Continued a	on attached page(s)			i 							
		INST	RUCTIONS			Ite:		En	nployer(s)	Name(s) and A	ddress(es)	
	o should 6617 Idah		ny lobbyist registered w	nder Sectio	n	No. 1		st Commu Main 11th		ns Boise, ID 83	3702	
Fili	ng deadh		t is due on January 31st bbist semi-annual repor		31st.	No. 2						
то	BE FILE	B Secr	en Ysursa etary of State			No. 3						
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852					No. 4							

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.							
	Date Amount Nar				ne of I	egislator, Public or Executive Offi	cial Rec	ceiving or Benefiting
Item 5	or Ho	use Bill,		ion, the number of the Senace legislative activity in which		LEGISLATIVE SUB		
Subject				Appropriation Bill Number	01	: Subject Agriculture, horticulture,	Code 17	Subject Health service, medicine, drugs
<u>(from</u>		Legisla	ive Ident. Number	and Soction Number	02 03 04 05 06 07 08 09 10 11	Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campuigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	18 19 20 21 22 23 24 25 26 27 28 29 30	judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads
						CERTIFICATION: I hereby certify the correct statement in accordance with 8		
Item 6 Identify any rule, ratemaking decision, procurement, contract bid or bid process, financial services agreement or bond lobbyist was supporting or opposing.				_	Obbers signature M. Aument	mu	Date Date	
					_	mployer No. 2 signature		Date
					E	nployer No. 3 signature		Date
					E	nployer No. 4 signature		Date